

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 8
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) The 2016 Committee		FEC IDENTIFICATION NUMBER ▼ C C00569905	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 11 / 2015	

Full Name of Payee International Data Management, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2015	
Mailing Address 490 White Pond Drive		Amount 1922.27	
City Akron	State OH	Zip Code 44320-1122	Transaction ID : WFT2015109178-1
Purpose of Expenditure Direct Mail - Postage	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2015	
Name of Federal Candidate Dr. Ben Carson		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 71571.27		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee RST Marketing		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2015	
Mailing Address 1272 Corporate Park Road		Amount 78500.00	
City Forest	State VA	Zip Code 24551	Transaction ID : WFT20151091711-1
Purpose of Expenditure Direct Mail - Postage	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2015	
Name of Federal Candidate Dr. Ben Carson		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 150071.27		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	80422.27
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Frank

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2015

Signature

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Form/Schedule: SE

Transaction ID : WFT2015109178-1

This report has been amended to include the appropriate state information as noted in a RFAI from the FEC dated 11/16/2015. The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. Therefore, there is no state included. \$37.69 has been allocated equally to each of the remaining scheduled primary elections.

Form/Schedule: SE

Transaction ID: WFT20151091711-1

This report has been amended to include the appropriate state information as noted in a RFAI from the FEC dated 11/16/2015. The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. Therefore, there is no state included. \$1,539.22 has been allocated equally to each of the remaining scheduled primary elections.

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) The 2016 Committee		FEC IDENTIFICATION NUMBER ▼ C C00569905	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">2015</div> </div>	

Full Name of Payee Sisk Fulfillment Services			Date of Public Distribution/Dissemination <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2015</div> </div>		
Mailing Address 1900 Industrial Park Road			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12287.97</div>		
City Fredericksburg	State MD	Zip Code 21632	Transaction ID : WFT20151091713-1 Date of Disbursement or Obligation <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2015</div> </div>		
Purpose of Expenditure Direct Mail - Postage		Category/ Type 004	Name of Federal Candidate Dr. Ben Carson		
			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">162359.24</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

Full Name of Payee Zip Mailing Services, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2015</div> </div>		
Mailing Address 6304 Sheriff Rd Suite Z			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9500.00</div>		
City Landover	State MD	Zip Code 20785	Transaction ID : WFT20151091714-1 Date of Disbursement or Obligation <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2015</div> </div>		
Purpose of Expenditure Direct Mail - Postage		Category/ Type 004	Name of Federal Candidate Dr. Ben Carson		
			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">171859.24</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;">21787.97</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Frank

[Electronically Filed]

Date

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Signature

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Form/Schedule: SE

Transaction ID : WFT20151091713-1

This report has been amended to include the appropriate state information as noted in a RFAI from the FEC dated 11/16/2015. The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. Therefore, there is no state included. \$240.94 has been allocated equally to each of the remaining scheduled primary elections.

Form/Schedule: SE

Transaction ID: WFT20151091714-1

This report has been amended to include the appropriate state information as noted in a RFAI from the FEC dated 11/16/2015. The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. Therefore, there is no state included. \$186.27 has been allocated equally to each of the remaining scheduled primary elections.

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(Schedule E)PAGE 5 OF 8
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) The 2016 Committee		FEC IDENTIFICATION NUMBER ▼ C C00569905	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 11 / 11 / 2015	

Full Name of Payee Campaign Funding Direct, Inc.		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 09 / 2015	
Mailing Address 1420 Spring Hill Road		Amount 11730.99	
City Suite 490	State VA	Zip Code 22102	Transaction ID : WFT20151091717-1
Purpose of Expenditure Agency Fees - Consulting	Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 09 / 2015	
Name of Federal Candidate Dr. Ben Carson		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		183590.23	

Full Name of Payee ECG Data Center		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 09 / 2015	
Mailing Address 1420 Spring Hill Road Suite 490		Amount 7136.43	
City McLean	State VA	Zip Code 22102	Transaction ID : WFT20151091726-1
Purpose of Expenditure Direct Mail - List Maintenance	Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 09 / 2015	
Name of Federal Candidate Dr. Ben Carson		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		190726.66	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	18867.42
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Frank

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 21 / 2015

Signature

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Form/Schedule: SE

Transaction ID : WFT20151091717-1

This report has been amended to include the appropriate state information as noted in a RFAI from the FEC dated 11/16/2015. The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. Therefore, there is no state included. \$230.02 has been allocated equally to each of the remaining scheduled primary elections.

Form/Schedule: SE

Transaction ID: WFT20151091726-1

This report has been amended to include the appropriate state information as noted in a RFAI from the FEC dated 11/16/2015. The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. Therefore, there is no state included. \$139.93 has been allocated equally to each of the remaining scheduled primary elections.

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 7 OF 8
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) The 2016 Committee		FEC IDENTIFICATION NUMBER ▼ C C00569905	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 11 / 11 / 2015	

Full Name of Payee Omega List Company		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2015	
Mailing Address 1420 Spring Hill Road Suite 490		Amount 21116.40	
City McLean	State VA	Zip Code 22102	Transaction ID : WFT20151091729-1
Purpose of Expenditure List Rental Expenses		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2015
Name of Federal Candidate Dr. Ben Carson		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		211843.06	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/ Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	21116.40
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Frank

[Electronically Filed]

Date

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12 / 21 / 2015

Signature

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Form/Schedule: SE

Transaction ID : WFT20151091729-1

This report has been amended to include the appropriate state information as noted in a RFAI from the FEC dated 11/16/2015. The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. Therefore, there is no state included. \$414.05 has been allocated equally to each of the remaining scheduled primary elections.

Form/Schedule:

Transaction ID: